

BEST AVAILABLE COPY

MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

101553709

CLAIMS

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | | | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
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| 3 | | | | | | | 53 | | | | | | |
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| TOTAL IND. | / | | | | | | | | | | | | |
| TOTAL DEP. | 6 | ← | | ← | | ← | | | | | | | |
| TOTAL CLAIMS | 7 | | | | | | | | | | | | |